SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	. 7	92 OF	1	281	
(c	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

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	ne name and address of any political committee to					
NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL CO	MMITTEE					
Full Name (Last, First, Middle Initial) A. Brian Roth	Date of Receipt					
Mailing Address 856 Kennesaw	01 27 2015					
City	Transaction ID: 2015M02L11AI02039					
Birmingham	MI 48009-5719	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	275.00				
Name of Employer	Occupation					
SPECIALISTS IN REHAB MEDICINE, P.C.	PHYSICIAN					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	275.00					
Full Name (Last, First, Middle Initial) Matthew Miller	Date of Receipt					
Mailing Address 711 W End Ave Apt 4C		01 27 2015				
City	State Zip Code	Transaction ID : 2015M02L11AI02040				
New York	NY 10025-6821	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	800.00				
Name of Employer REQUESTED	Occupation					
REQUESTED Receipt For:	REQUESTED					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00					
Full Name (Last, First, Middle Initial) C. Dr. Joseph Irrera						
Mailing Address 11 Woodrow Road	01 27 2015					
City Batavia	State Zip Code NY 14020-1201	Transaction ID : 2015M02L11AI02041 Amount of Each Receipt this Period 500.00				
FEC ID number of contributing federal political committee.	C					
Name of Employer						
REQUESTED	REQUESTED					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
SUBTOTAL of Receipts This Page (optional)		1575.00				
TOTAL This Period (last page this line number	r only)					